SCHEDULE 5-E

PAGE 6/34 ITEMIZED INDEPENDENT EXPENDITURES FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) HUMANE SOCIETY LEGISLATIVE FUND Full Name (Last, First, Middle Initial) of Payee Date **Diners Club** 2008 Mailing Address Amount P O Box 6935 78.07 City State Zip Code NV 88901 The Lalces Purpose of Expenditure Office Sought: Х House Category/ State: MI Transportation, lodging Type House Senate District: _09 President Name of Federal Candidate Supported or Opposed by Expenditure: Joseph K Knollenberg Check One: Support X Oppose Disbursement For: X General Primary Calendar Year-To-Date Per Election 7013.21 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date **Diners Club** 2008 Mailing Address **Amount** P O Box 6935 78.07 Zip Code City State The Lalces NV 88901 Purpose of Expenditure Office Sought: χ House State: MI Category/ Transportation, lodging Type House Senate District: 09 President Name of Federal Candidate Supported or Opposed by Expenditure: **Gary Peters** χ Support Check One: Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 4750.11 for Office Sought Other (specify) Full Name (Last, First, Middle Initial) of Payee Date **Diners Club** 2008 Mailing Address Amount P O Box 6935 88.65 Zip Code City State 88901 NV The Lalces Purpose of Expenditure Office Sought: State: MI Category/ \mathbf{x} House Transportation, lodging Type Senate House District: 09 President Name of Federal Candidate Supported or Opposed by Expenditure: Joseph K Knollenberg Check One: Support X Oppose Disbursement For: Primary General Calendar Year-To-Date Per Election 2008 7013.21 for Office Sought Other (specify) 244.79 (a) SUBTOTAL of Itemized Independent Expenditures .. (b) SUBTOTAL of Unitemized Independent Expenditures.....

(c) TOTAL Independent Expenditures

(carry total from last page forward to Line 7)